CITY OF IDAHO FALLS



Received By:

Variance Fee: \$300.00

PLANNING AND BUILDING DIVISION

P.O. BOX 50220 Idaho Falls, ID 83405-0220 www.ci.idaho-falls.id.us

Planning Department • (208) 612-8276

FAX (208) 612-8520

Building Department • (208) 612-8270

VARIANCE APPLICATION

It is the desire of staff to process your request for a variance in a timely manner. Please complete the application in full and provide the requested attachments to prevent any delay. You are encouraged to discuss your application with Planning Staff prior to submittal. Upon completion of a review by staff, the Board of Adjustment will consider and rule on your request during a formal public hearing. Five (5) concurring votes are required for the Board to pass any action.

Applicant Information				
Representing Company:				
Contact Name:		Phone:		
Address:		Fax:		
City:	State:	Zip:		
Owner Information (If other than Applicant)				
lame:		Phone:		
Address:				
City:	State:	Zip:		
Property for Consideration				
Site Address:				
Current Zone:				
Legal Description (i.e. Addition, Division No., Lot, Block):				
Nature of Request				
Signature of Applicant(s):		I -		
		Date:		
		Date:		

Variance Application '10.doc Revised 1/10

Requirements for Granting a Variance The following conditions (5-8-1 4 of the Zoning Ordinance) must be fulfilled before a variance can be granted by the Board of Adjustment. Showing that a variance is profitable or desirable for the owner and no harm will be done to others is not sufficient. Please explain how granting your request conforms to each of the requirements below. 1. Undue hardship resulting from physical limitations (i.e. physical size, shape, topography, location, and/or surroundings) on development unique to the property upon which the variance is requested and such hardship is not generally applicable to other properties in the same zone. The hardship is not economic in nature and was not created by any action of the lot's owner or occupant. 3. Granting the variance is not in conflict with the public interest nor creates a nuisance or potential harm to the neighborhood in which the lot is located.

Sketch Plan

Please attach a sketch of your proposal/plot plan in the requested format and with the following information:

- 1. Minimum size of 8½" x 11" drawn to scale.
- 2. Show north arrow and scale at which the plan is drawn (not to be less than 1" = 30").
- 3. Perimeter and dimensions of the entire property including acreage/square footage.
- 4. Names and location of all bordering streets.
- 5. Identify the location of all easements and/or right-of-ways.
- 6. The use, location and dimension of all present and proposed structures and/or additions, including the distance from all structures to the property lines.
- 7. Square footage of all buildings or structures on the property involved.
- 8. If your request is to reduce required landscaping then provide location and square feet of provided landscaping areas. Landscaped plans are required for new landscaping.
- 9. If your request is to reduce the required parking then provide the location, configuration, dimensions, number of provided off street parking stalls, drive aisles and access to parking stalls from the street.

Affidavit of Legal Interest (See Attachment)

If you are representing the owner of the property in question, a notarized Affidavit of Legal Interest must accompany the application.

Variance Application '10.doc

AFFIDAVIT OF LEGAL INTEREST

STATE OF IDAHO		
COUNTY OF BONNEVILLE		
I,		(Address)
(City)	(State)	Being first duly sworn upon Oath, depose and say:
Being the owner of record of the property described	on the attached shee	et, I grant permission to:
, (Name)		(Address)
To submit the following application pertaining to that Preliminary Plat Final Plat Variance Conditional Use Permit I agree to indemnify, defend and hold the City of claims or liability resulting from any dispute as townership of the property which is the subject of the	Planned Unit Comprehensi Annexation Rezone to Idaho Falls and its o the statements of	Development ve Plan Map Amendment employees harmless from any
	day of	, 20
SUBSCRIBED AND SWORN to before me the day a	nd year first above v	(Signature) vritten.
	N	otary Public for Idaho
	Residing at	
	My Commissi	on Expires:

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